## L23000540513

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## COVER LETTER

TO: Registration Section Division of Corporations	
IV D Solutions LLC SUBJECT:	
Name of L	imited Liability Company
Dear Sir or Madam;	
The enclosed Registered Agent/Registered Office Cha	ange and fee(s) are submitted for filing.
Please return all correspondence concerning this matte	er to the following:
Amber McGrew	
Name of Person	
Oaks Accounting LLC	
Firm/Company	
311 N Excelda Ave	
Address	
Tampa, FL 33609	
City/State and Zip Code	
amcgrew@oaksaccounting.com	
E-mail address: (to be used for future annual rep	port notification)
For further information concerning this matter, please	call:
Amber McGrew	321 442-0758
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amou	int:
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
INHS18 (2/14)	

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company subputs the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

E/A	me of the limited liability company:  IV D Solutions I I C			IV D So	olutions LLC
(a)	Pencipal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<del></del>	(b)	·	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	1169 Yarnell Avenue			1169 Yan	rnell Avenue
	l ake Wales, FL 33853			Lake Wa	iles, FL 33853
	12 06 2023		Į	.23000540	0513
(3)	Date of filing/registration in Florida Zenbusiness Inc	4.	_		Document number
(a)	Registered Agent and Registered Office shown on the records of Zenbusiness Inc	the Flor	ida (	Dept. of Sta	alc:
	Registered Office Address (MUST BE FLORIDA STREET) 336 E College Ave Suite 301	4DDRE	<u>55</u> )		
	Tallahassce . FL	33853		<del> </del>	2024 TÀLL
<b>b</b> )	Oaks Accounting LLC				2024 JUN 26
(-)	Enter name of NEW Registered Agent and/or NEW Registered	Office	ddr	<u>ess</u> :	SEE P
	Oaks Accounting LLC				FLOOR TO
	NEW Registered Office Address:				57 RID
	311 N Excelda Ave				_
	Tampa, FL	33609			_
ige it w	or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia tre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registe bility of the linited	red omp nite liab	office and pany, it is d liability	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
nat	ture of a member or authorized representative of a member				Printed or typed name of signee
visio obli nere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ly reflect a change in the registered office address, I have	erforn for in	iano Cha	re of my a voter 605.	hities, and I am familiar with and accept. F.S. Or. if this document is being file.